

## Epilepsy Monitoring Unit at London Health Sciences Centre

### What is the Epilepsy Monitoring Unit?

The Epilepsy Monitoring Unit (EMU) is an open concept, 10-bed, co-ed unit at University Hospital in London. It is the centerpiece of the Regional Epilepsy surgery Centre of Excellence (RESC), which has been helping to diagnose epilepsy and related conditions since 1977. The EMU is one of the largest unit of its kind in Canada. The purpose is to provide continuous video/EEG monitoring for adolescents and adults who are undergoing investigation of seizures and related events.

To capture seizures and pinpoint their origin in the brain as they happen in real time, each bed is equipped with a video camera, microphone, and state-of-the-art EEG equipment to monitor patients 24 hours a day without interruption. There is a nursing station in the centre of the unit with one or two nurses present at all times for patient care.

### What to Expect During Your Stay

The patients in the EMU are male and female and range in age from adolescents to senior adults. You may see other patients having different types of seizures. All seizures are individual. Some people may have large seizures and others may have small ones. Everyone is in good hands under the watchful eye of trained staff. With 10 patients in the EMU at one time, you may meet people who think and act differently than you do. Rude or disrespectful language and physical aggression are unacceptable. All patients need to respect each other's space and privacy.

You are to maintain as normal an activity level as the monitoring allows. You are not considered an ill patient but you must stay on the Unit so that we can capture the best information to help you.

All patients must take responsibility for their belongings and maintain a safe, uncluttered environment around their bed. Patients make their own beds daily. Bed linen is changed on a weekly basis or sooner if needed.

The average length of stay is 5 to 10 days but your length of stay is hard to predict because it varies depending on the number and types of seizures recorded. Some patients stay longer, particularly if seizures are infrequent or if they need specialized recording. It is not uncommon to have fewer seizure than at home; medication may be

reduced to increase the chances of capturing seizures. Do not do this prior to admission.

When discharge time comes, you may have little notice to arrange your transportation home. If you are dependent on air transportation, an open plane ticket would be advisable.

### The Team

During your stay you may encounter multiple professionals who are part of our EMU.

- One or two nurses will always be present in the EMU and will be sure that you are safe during a seizure. Nurses will also watch and record your seizures and be there to help as needed.
- A Neurology fellow or resident physician will check in with you daily.
- Epileptologist (speciality neurologist in charge of your care) will review your EEG results and activity daily, and will visit you at least twice each week to discuss your progress and answer questions. You may have more than one Epileptologist looking after you during your stay.
- EEG technologists will apply and remove the recording wires and test the recording system every day.
- A Social Worker will meet with you to ensure you are connected with appropriate resources and supports.
- A Neuropsychologist may see you and ask you to participate in testing of your thinking skills (e.g., attention, memory, language, etc.) with a psychometrist.
- A Psychologist may talk to you and might ask you to complete a questionnaire that asks personal questions to help with your overall diagnosis and care.
- A Neurosurgeon may visit you if surgery is an option or this may be arranged as an outpatient.
- An occupational therapist may see you if issues with daily functioning or home safety are identified.
- A Community Epilepsy Liaison is a staff member from The Local Community Epilepsy Agency who has specialized training in epilepsy with knowledge of available community services.

Sometimes a large team of professionals will visit you at your bedside to discuss your care. At other times, one professional may see you individually.

## Safety

The Unit was designed with your safety in mind, with 24-hour in-room observation and care from specially trained nursing staff.

You must remain in the Unit, particularly when your medications are decreased. When medication levels are low, the risk of injury from falls is increased.

At night, the nurse will raise the side rails on the bed for your protection.

## Observation and Privacy

It is the nurses' responsibility to observe and record every aspect of your seizure. You will be working closely with nurses; therefore you must be present on the Unit at all times. (See "Leaving the Unit").

There are private washrooms in the unit as well as 2 showers. When you shower, the nursing staff may confirm verbally that you are OK. The washrooms have doors designed for emergency access.

Because the nurses must be able to see you to do a proper recording, you will experience a reduced amount of privacy. At night, the curtains at the end of your bed must remain open while you sleep. During the daytime, the team will include you in a discussion about your care at your bedside.

A private lounge beside the Unit is available for short family visits. If you choose to leave the Unit for a break, you must be prepared to accept the risk of having a seizure or fall while away from our specialized staff.

## EEG Monitoring and Video

You will have EEG recording wires, similar to outpatient EEG wires, attached to your head during your stay. These wires are connected to a small portable recording unit that you can carry over your shoulder. The recording unit sends your brain wave information to a bedside receiver by way of a connecting cord. The cord must stay plugged in otherwise important information may be missed, prolonging your stay. A camera is mounted

in the ceiling for 24 hour sound and video recording. You may move about in the Unit while being monitored but cannot leave without disrupting the recording. Periodically, the wires will be removed from your head and you will be allowed to wash your hair.

## What to Bring

Please bring your current medications with you in their original containers, as you will continue taking your own medication until instructed otherwise. If your most recent MRI was not done at LHSC, it would be helpful to bring a copy on CD. Keeping in mind the hospital's scent-free policy, you should bring your own toiletries, including:

- Brush or Comb
- Shampoo and conditioner
- Soap and deodorant
- Toothbrush and toothpaste
- Kleenex
- Slippers
- Pillow/pillowcase (optional)
- Food/snacks (optional)
- A notebook to record any questions you have.

Please bring comfortable clothing to wear during the day, and night clothing that is appropriate for a male and female Unit. Tops with button-front closures (or loose necks) make it easier to dress with EEG wires in place. Laundry facilities are not available on-site.

You should bring items to help occupy your time. Some patients bring books, puzzles, games, small crafts, personal music player with headphones, portable DVD player, computer, etc. Patients can pay a daily fee to activate the hospital TV and phone at each bedside. Free access is available for the internet. Tablets, laptop and DVD players are available free of charge, but are to be shared by all EMU.

## Smoking Policy

All areas inside and outside the hospital are non-smoking. Therefore, you are encouraged to quit before your arrival. Smoking on hospital property can result in charges with potential fine. Smoking cessation aids can be made available to you. Please ask your nurse.

## Visitors

Generally, visitors (including children) are welcome in the Unit between 9:00 am and 9:00 pm. Please understand that visiting may be interrupted to provide patient care and to complete assessments and testing.

## Leaving the Unit

We recognize that staying in the Unit all day and night will be a change from your typical lifestyle. However, it is necessary in order for us to capture the information that will best help with your medical care. At the physician's discretion patients may take up to three trips per day outside the Unit (maximum 15 minutes per trip) for a quick change of scenery, to visit the cafeteria, gift shop, etc. This rule is in place for your safety and to allow our team to obtain the best information possible about your condition

Failure to adhere to this policy may result in your discharge from the hospital.

You must sign out when leaving the Unit and sign in upon return. We prefer that you are accompanied by another adult, particularly if your medications have been decreased. Due to the nature of your admission to the Unit, there can be risks to such outings, including the risks of falls.

You may not leave the Unit from 11:00 pm to 7:00 am.

If you have any questions or concerns, please feel free to call the Epilepsy Navigator: [519-685-8500 ext. 36775](tel:519-685-8500)

